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| Fill in this inform | ation to identify y | | | |
|---------------------|------------------------|-------------|-----------|--|
| Debtor 1 | Tabatha | Michelle | Johnson | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States Bar | nkruptcy Court for the | | | |
| Case number | 25-13561 | | | Check if this is an amended filing |

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| addit | ional | pages, write your name and ca | se number (if known). Answer every question. | | |
|-------|---------------|-------------------------------|---|---|---|
| Pa | rt 1: | Describe Each Resider | ice, Building, Land, or Other Real Estate | You Own or Have an | Interest In |
| | rt 1: Do y | Describe Each Resider | what is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare | You Own or Have an ar property? Do not deduct secured of the amount of any secure Creditors Who Have Clar. Current value of the entire property? \$322,000.00 Describe the nature of y (such as fee simple, tendal life estate), if known. Homestead Check if this is comma (see instructions) | aims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$322,000.00 our ownership interest ancy by the entireties, or |
| 2. | | | own for all of your entries from Part 1, including any number here | | \$322,000.00 |
| Pa | rt 2: | Describe Your Vehicles | S | | |
| | own th | | interest in any vehicles, whether they are registered a vehicle, also report it on Schedule G: Executory Contra lity vehicles, motorcycles | | es |
| | | Yes | | | |

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Debtor Johnson, Tabatha Michelle Case number (if known) 25-13561

| | 3.1 | Make: Model: Year: Approximate mileage: Other information: | Maxima 2018 | Who has an interest in the property? Check one. ✓ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this is community property (see instructions) | Do not deduct secured class the amount of any secure Creditors Who Have Class Current value of the entire property? \$9,000.00 | d claims on Schedule D: | | |
|------------------------|---|--|-------------------|--|--|---|--|--|
| | If you | own or have more than | one describe l | here. | | | | |
| | 3.2 | Make: Model: Year: Approximate mileage: Other information: | INFINITI Q50 2019 | Who has an interest in the property? Check one. ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions) | Do not deduct secured class the amount of any secure Creditors Who Have Claim Current value of the entire property? \$16,000.00 | d claims on Schedule D: | | |
| 4. | | <i>nples:</i> Boats, trailers, mo lo | | nd other recreational vehicles, other vehicles, and a watercraft, fishing vessels, snowmobiles, motorcycle ac | | | | |
| 5. | | | | vn for all of your entries from Part 2, including any e umber here | | \$25,000.00 | | |
| Pa | rt 3: | Describe Your | Personal a | and Household Items | | | | |
| Do y | ou owi | n or have any legal or o | equitable inter | est in any of the following items? | | Current value of the portion you own? Do not deduct secured claims or exemptions. | | |
| 7. | Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware No Yes. Describe | | | | | | | |
| | ☐ N ☑ Ye | es. Describe | | | | \$300.00 | | |

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Debtor Johnson, Tabatha Michelle

| 8. | Collectibles of value | |
|------|---|---|
| | Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles | |
| | ☑ No | |
| | Yes. Describe | |
| 9. | Equipment for sports and hobbies | |
| | Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments | |
| | ☑ No | |
| | Yes. Describe | |
| 10. | Firearms | |
| | Examples: Pistols, rifles, shotguns, ammunition, and related equipment | |
| | ☑ No | |
| | Yes. Describe | |
| 11. | Clothes | |
| ••• | Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories | |
| | □ No | |
| | ✓ Yes. Describe | #200.00 |
| | | \$200.00 |
| 40 | lauralin. | |
| 12. | Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, | |
| | silver | |
| | ☑ No | |
| | Yes. Describe | |
| 13. | Non-farm animals | |
| | Examples: Dogs, cats, birds, horses | |
| | ☑ No | |
| | Yes. Describe | |
| 14. | Any other personal and household items you did not already list, including any health aids you did not list | |
| | ☑ No | |
| | Yes. Give specific information | |
| | momation | |
| 15. | Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached | \$1,500.00 |
| | for Part 3. Write that number here | Ψ1,300.00 |
| | | |
| Pa | t 4: Describe Your Financial Assets | |
| Do y | ou own or have any legal or equitable interest in any of the following? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 16. | Cash | |
| | Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition | |
| | ☑ No | |
| | ☐ Yes | |

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Debtor Johnson, Tabatha Michelle

| 17. | Deposits of money | | | | | |
|-----|---|---|----------|--|--|--|
| | · | unts; certificates of deposit; shares in credit unions, brokerage houses, nultiple accounts with the same institution, list each. | | | | |
| | ☐ No | | | | | |
| | √ Yes | Institution name: | | | | |
| | 17.1. Checking account: | Wood Forest Checking | \$100.00 | | | |
| 18. | Bonds, mutual funds, or publicly traded stocks | | | | | |
| | Examples: Bond funds, investment accounts with broken | kerage firms, money market accounts | | | | |
| | ⊴ No | | | | | |
| | ☐ Yes | | | | | |
| 19. | Non-publicly traded stock and interests in incorpor LLC, partnership, and joint venture | ated and unincorporated businesses, including an interest in an | | | | |
| | ☑ No | | | | | |
| | Yes. Give specific information about them | | | | | |
| | | | | | | |
| 20. | Government and corporate bonds and other negotiable and non-negotiable instruments | | | | | |
| | Negotiable instruments include personal checks, cashie Non-negotiable instruments are those you cannot trans | | | | | |
| | ☑ No | | | | | |
| | ☐ Yes. Give specific information about them | | | | | |
| 21. | Retirement or pension accounts | | | | | |
| | Examples: Interests in IRA, ERISA, Keogh, 401(k), 40 | 3(b), thrift savings accounts, or other pension or profit-sharing plans | | | | |
| | ☑ No | | | | | |
| | Yes. List each account separately. | | | | | |
| 22. | Security deposits and prepayments | | | | | |
| | Your share of all unused deposits you have made so th | at you may continue service or use from a company | | | | |
| | Examples: Agreements with landlords, prepaid rent, p others | ublic utilities (electric, gas, water), telecommunications companies, or | | | | |
| | ☑ No | | | | | |
| | ☐ Yes | | | | | |
| 23. | Annuities (A contract for a periodic payment of money | to you, either for life or for a number of years) | | | | |
| | ☑ No | | | | | |
| | ☐ Yes | | | | | |

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Debtor Johnson, Tabatha Michelle

| 24. | Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). | |
|--------------------|--|---|
| | √ No | |
| | ☐ Yes | |
| 25. | Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit | |
| | ⊴ No | |
| | Yes. Give specific information about them | |
| 26. | Patents, copyrights, trademarks, trade secrets, and other intellectual property | |
| | Examples: Internet domain names, websites, proceeds from royalties and licensing agreements | |
| | ☑ No | |
| | Yes. Give specific information about them | |
| 27. | Licenses, franchises, and other general intangibles | |
| | Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses | |
| | ☑ No | |
| | ☐ Yes. Give specific | |
| | information about them | |
| Mone | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| Mone 28. | information about them | portion you own? Do not deduct secured |
| | information about them ey or property owed to you? | portion you own? Do not deduct secured |
| | information about them ey or property owed to you? Tax refunds owed to you | portion you own? Do not deduct secured |
| | information about them ey or property owed to you? Tax refunds owed to you ✓ No ☐ Yes. Give specific information about them, including whether you already filed the returns and | portion you own? Do not deduct secured |
| 28. | information about them Eavy or property owed to you? Tax refunds owed to you No Yes. Give specific information about them, including whether you already filed the returns and the tax years | portion you own? Do not deduct secured |
| 28. | information about them ey or property owed to you? Tax refunds owed to you ✓ No Yes. Give specific information about them, including whether you already filed the returns and the tax years | portion you own? Do not deduct secured |
| 28. | information about them ey or property owed to you? Tax refunds owed to you ✓ No Yes. Give specific information about them, including whether you already filed the returns and the tax years | portion you own? Do not deduct secured |
| 28. | information about them ey or property owed to you? Tax refunds owed to you ✓ No Yes. Give specific information about them, including whether you already filed the returns and the tax years | portion you own? Do not deduct secured |
| 28. | information about them ey or property owed to you? Tax refunds owed to you ✓ No Yes. Give specific information about them, including whether you already filed the returns and the tax years Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ✓ No Yes. Give specific information | portion you own? Do not deduct secured |
| 28. | information about them ay or property owed to you? Tax refunds owed to you No Yes. Give specific information about them, including whether you already filed the returns and the tax years | portion you own? Do not deduct secured |

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Debtor Johnson, Tabatha Michelle

| 31. | Interests in insurance policies | |
|-----|---|----|
| | Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance | |
| | ☑ No | |
| | Yes. Name the insurance company of each policy and list its value | |
| 32. | Any interest in property that is due you from someone who has died | |
| | If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. | |
| | ☑ No | |
| | Yes. Give specific information | |
| 33. | Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment | |
| | Examples: Accidents, employment disputes, insurance claims, or rights to sue | |
| | ☑ No | |
| | Yes. Describe each claim | |
| 34. | Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims | |
| | ☑ No | |
| | Yes. Describe each claim | |
| 35. | Any financial assets you did not already list | |
| | ☑ No | |
| | ☐ Yes. Give specific information | |
| 36. | Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here |) |
| Pa | rt 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part | 1. |
| 37. | Do you own or have any legal or equitable interest in any business-related property? | |
| | ☑ No. Go to Part 6. | |
| | ☐ Yes. Go to line 38. | |
| 45. | Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here | 2 |
| | | _ |
| Pa | Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. | |
| 40 | If you own or have an interest in farmland, list it in Part 1. | |
| 46. | Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? | |
| | ▼ No. Go to Part 7. | |
| | Yes. Go to line 47. | |
| 52. | Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here |) |
| Pa | rt 7: Describe All Property You Own or Have an Interest in That You Did Not List Above | |
| 53. | Do you have other property of any kind you did not already list? | |
| | Examples: Season tickets, country club membership | |

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Debtor Johnson, Tabatha Michelle

| | ☑ No | | | |
|-----|---|----------------|------------------------------|---------------|
| | Yes. Give specific information | | | |
| | | | | |
| 54. | Add the dollar value of all of your entries from Part 7. Write that | at number here | → | \$0.00 |
| | | | | |
| Pa | rt 8: List the Totals of Each Part of this Form | | | |
| 55. | Part 1: Total real estate, line 2 | | | \$322,000.00 |
| | | | | |
| 56. | Part 2: Total vehicles, line 5 | \$25,000.00 | | |
| 57. | Part 3: Total personal and household items, line 15 | \$1,500.00 | | |
| 58. | Part 4: Total financial assets, line 36 | \$100.00 | | |
| | , | Ψ.σσ.σσ | | |
| 59. | Part 5: Total business-related property, line 45 | \$0.00 | | |
| 60. | Part 6: Total farm- and fishing-related property, line 52 | \$0.00 | | |
| 61. | Part 7: Total other property not listed, line 54 + | \$0.00 | | |
| 01. | rait 7. Total other property flot listed, line 34 | \$0.00 | | |
| 62. | Total personal property. Add lines 56 through 61 | \$26,600.00 | Copy personal property total | + \$26,600.00 |
| | | | | |
| 63. | Total of all property on Schedule A/B. Add line 55 + line 62 | | | \$348,600.00 |
| | | | | |

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| Fill in this inform | ation to identify you | | | | | |
|--|-----------------------|-------------|-----------|---|---|------------------------------------|
| Debtor 1 | Tabatha | Michelle | Johnson | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States Bankruptcy Court for the: District of New Jersey | | | | | | |
| Case number | 25-13561 | | | _ | Г | Check if this is an |
| (if known) | | | | | | Check if this is an amended filing |

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/25

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| F | Part 1: | Ider | ntify the Property You | u Claim as Exempt | | | | |
|----|---|------|--|--|---|--|------------------------------------|--|
| 1. | ☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) | | | | | | | |
| | Brief description of the property and line on <i>Schedule A/B</i> that lists this property | | | Current value of the portion you own Copy the value from Schedule A/B | Check only one box for each exemption. Copy the value from | | Specific laws that allow exemption | |
| | Brief description Line from Schedule | | 12 Leicester Lane Trenton, NJ 08628 | \$322,000.00 | 1 | \$31,575.00 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(1) | |
| | Brief description Line from Schedule | | Household goods | \$1,000.00 | 1 | \$1,000.00 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(3) | |
| 3. | any applicable statutory limit | | | | | | | |

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Debtor 1 Tabatha Michelle Johnson Case number (if known) 25-13561

Last Name

Middle Name

| | on of the property and | Current value of the | Am | ount of the exemption you claim | Specific laws that allow exemption | |
|---|-------------------------|--|--|---|------------------------------------|--|
| line on Schedule A/B that lists this property | | portion you own Copy the value from Schedule A/B | Check only one box for each exemption. | | | |
| Brief description: | Electronics | \$300.00 | a | \$300.00 | 11 U.S.C. § 522(d)(3) | |
| Line from Schedule A/B: | | | | 100% of fair market value, up to any applicable statutory limit | _ | |
| Brief description: | Clothes | \$200.00 | 1 | \$200.00 | 11 U.S.C. § 522(d)(3) | |
| Line from Schedule A/B: | 11 | | | 100% of fair market value, up to any applicable statutory limit | _ | |
| Brief description: | Wood Forest Checking | \$100.00 | | | | |
| | Checking account | | | \$100.00 | 11 U.S.C. § 522(d)(5) | |
| Line from Schedule A/B: | 17 | | | 100% of fair market value, up to any applicable statutory limit | | |

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| | | | Document | Page 10 of 53 | | | |
|---------------------|----------------------|--------------------------|---------------------|---------------------------------|------------------------|-------------------------------|-----------|
| Fill in this inform | ation to identify yo | our case: | | | | | |
| Debtor 1 | Tabatha | Michelle | Johnson | | | | |
| | First Name | Middle Name | Last Name | | | | |
| Debtor 2 | | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | | |
| United States E | Bankruptcy Court f | or the: District of Ne | w Jersey | | | | |
| Case number (i | if 25-13561 | | | | | 7 Chaalcifabia | |
| known) | | | | | | Check if this amended fili | |
| Official Forn | n 106D | | | | | | |
| Schedu | le D: Cre | editors Wh | o Have C | laims Secured | d by Prope | rty | 12/ |
| Be as complete a | and accurate as p | oossible. If two married | d people are filing | together, both are equally resp | oonsible for supplying | correct inform | ation. If |

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

| | ne and case number (if known). | age, mi it out, number the entries, and attach it to | tins form. On the top | o or arry additional pag | jes, write you |
|----|--|---|---|---|-----------------------------------|
| 1. | Do any creditors have claims secured by | your property? | | | |
| | ☐ No. Check this box and submit this form☑ Yes. Fill in all of the information below. | to the court with your other schedules. You have not | thing else to report on | this form. | |
| F | Part 1: List All Secured Claims | | | | |
| 2. | separately for each claim. If more than one | more than one secured claim, list the creditor e creditor has a particular claim, list the other st the claims in alphabetical order according to the | Column A Amount of claim Do not deduct the value of collateral. | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |
| 2 | Creditor's Name 340 East Main Street Suite 400 | Describe the property that secures the claim: 2019 INFINITI Q50 | \$25,455.00 | \$16,000.00 | \$9,455.00 |
| | Spartanburg, SC 29302 City State ZIP Code | As of the date you file, the claim is: Check all the Contingent Unliquidated Disputed | at apply. | | |
| | Who owes the debt? Check one. | Nature of lien. Check all that apply. | | | |

☐ An agreement you made (such as mortgage or secured car loan)

☐ Statutory lien (such as tax lien, mechanic's lien)

☐ Judgment lien from a lawsuit

Last 4 digits of account number

☐ Other (including a right to

Add the dollar value of your entries in Column A on this page. Write that number here:

offset)

\$25,455.00

☑ Debtor 1 only

Debtor 2 only

another

☐ Debtor 1 and Debtor 2 only

community debt

Date debt was incurred

☐ At least one of the debtors and

☐ Check if this claim relates to a

5

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Debtor 1 Tabatha Michelle Johnson Case number (if known) 25-13561

Last Name

| Pa | | · · | is page, number them beginning with 2.3, | Column A Amount of claim Do not deduct the value of collateral. | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |
|-----|---|---|--|---|---|-----------------------------------|
| 2.2 | Capital One Auto | Finance | Describe the property that secures the claim: | \$10,338.00 | \$9,000.00 | \$1,338.00 |
| | PO Box 260848 | | 2018 Nissan Maxima | | | |
| | Plano, TX 75026 City State | ZIP Code | As of the date you file, the claim is: Check all that Contingent Unliquidated Disputed | t apply. | | |
| | Who owes the debt? | | Nature of lien. Check all that apply. | | | |
| | ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debt ☐ At least one of the another ☐ Check if this clair community debt | debtors and | □ An agreement you made (such as mortgage or secured car I □ Statutory lien (such as tax lien, mechanic's lien) □ Judgment lien from a lawsuit □ Other (including a right to offset) | | | |
| | Date debt was incurr | ed | Last 4 digits of account number | | | |
| | | | | | | |
| 2.3 | M&T Bank | | Describe the property that secures the claim: | \$265,236.00 | \$322,000.00 | \$0.00 |
| 2.3 | M&T Bank Creditor's Name 1 Fountain Pl. | | Describe the property that secures the claim: 12 Leicester Lane Trenton, NJ 08628 | \$265,236.00 | \$322,000.00 | \$0.00 |
| 2.3 | Creditor's Name | | 12 Leicester Lane Trenton, NJ 08628 As of the date you file, the claim is: Check all that | | \$322,000.00 | \$0.00 |
| 2.3 | Creditor's Name 1 Fountain Pl. | ZIP Code | 12 Leicester Lane Trenton, NJ 08628 | | \$322,000.00 | \$0.00 |
| 2.3 | Creditor's Name 1 Fountain Pl. Number Street Buffalo, NY 14203 | ZIP Code | 12 Leicester Lane Trenton, NJ 08628 As of the date you file, the claim is: Check all that Contingent Unliquidated | | \$322,000.00 | \$0.00 |
| 2.3 | Creditor's Name 1 Fountain PI. Number Street Buffalo, NY 14203 City State Who owes the debt? Debtor 1 only Debtor 2 only Debtor 1 and Debt At least one of the another | ZIP Code Check one. or 2 only debtors and | 12 Leicester Lane Trenton, NJ 08628 As of the date you file, the claim is: Check all that Contingent Unliquidated Disputed | t apply. | \$322,000.00 | \$0.00 |
| 2.3 | Creditor's Name 1 Fountain PI. Number Street Buffalo, NY 14203 City State Who owes the debt? Debtor 1 only Debtor 2 only Debtor 1 and Debt At least one of the | ZIP Code Check one. or 2 only debtors and | As of the date you file, the claim is: Check all that Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or s Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to | t apply. | \$322,000.00 | \$0.00 |
| 2.3 | Creditor's Name 1 Fountain PI. Number Street Buffalo, NY 14203 City State Who owes the debt? Debtor 1 only Debtor 2 only Debtor 1 and Debt At least one of the another Check if this clain | ZIP Code Check one. or 2 only debtors and n relates to a | As of the date you file, the claim is: Check all that Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or s Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to | t apply. | \$322,000.00 | \$0.00 |
| 2.3 | Creditor's Name 1 Fountain PI. Number Street Buffalo, NY 14203 City State Who owes the debt? Debtor 1 only Debtor 2 only Debtor 1 and Debt At least one of the another Check if this clair community debt Date debt was incurr | ZIP Code Check one. or 2 only debtors and m relates to a ed of your entries in | As of the date you file, the claim is: Check all that Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or s Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) | t apply. | \$322,000.00 | \$0.00 |

First Name

Middle Name

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Debtor 1 **Tabatha** Michelle Johnson Case number (if known) 25-13561 First Name Middle Name Last Name Column A Column B Column C Additional Page Amount of claim Value of collateral Unsecured Part 1: that supports this portion After listing any entries on this page, number them beginning with 2.3, Do not deduct the claim followed by 2.4, and so forth. value of collateral. If any 2.4 **Mariner Finance** Describe the property that secures the claim: \$2,255.00 \$0.00 \$2,255.00 Creditor's Name 8211 Town Center Drive Number Street As of the date you file, the claim is: Check all that apply. ☐ Contingent Unliquidated Nottingham, MD 21236 Disputed ZIP Code State Who owes the debt? Check one. Nature of lien. Check all that apply. **☑** Debtor 1 only ☐ An agreement you made (such as mortgage or secured car loan) Debtor 2 only ☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Debtor 1 and Debtor 2 only Judgment lien from a lawsuit ☐ Other (including a right to ■ At least one of the debtors and another offset) ☐ Check if this claim relates to a

\$2,255.00

\$303,284.00

Last 4 digits of account number

Add the dollar value of your entries in Column A on this page. Write that number here:

If this is the last page of your form, add the dollar value totals from all pages.

community debt

Date debt was incurred

Write that number here:

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| | | | 70 | T AUC IS OF SS | | | | | |
|---------------------|---|-------------------------|-----------|----------------|--|--|--|--|--|
| Fill in this inform | Fill in this information to identify your case: | | | | | | | | |
| Debtor 1 | Tabatha | Michelle | Johnson | | | | | | |
| | First Name | Middle Name | Last Name | | | | | | |
| Debtor 2 | | | | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | _ | | | | | |
| United States B | Bankruptcy Court f | or the: District of New | w Jersey | | | | | | |
| Case number | 25-13561 | | | _ | | | | | |
| (if known) | | | | | | | | | |
| Official Forn | n 106F/F | | | | | | | | |
| | <u> </u> | | | | | | | | |

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case

| | ber (if known). | ich the community rage to this page. On the top of any additi | nonai pages, | write your nam | ie and case |
|-----|--|--|------------------------------|-------------------|--------------------|
| 1. | Do any creditors have priority unsecured No. Go to Part 2. ✓ Yes. | | | | |
| 2. | claim listed, identify what type of claim it is. If amounts. As much as possible, list the claims fill out the Continuation Page of Part 1. If more | If a creditor has more than one priority unsecured claim, list the creat a claim has both priority and nonpriority amounts, list that claim has in alphabetical order according to the creditor's name. If you have than one creditor holds a particular claim, list the other creditors the instructions for this form in the instruction booklet.) | ere and show more than tw | both priority and | I nonpriority |
| | | т | otal claim | Priority amount | Nonpriority amount |
| 2.1 | Priority Creditor's Name Department of the Treasury | Last 4 digits of account number When was the debt incurred? | \$24,462.00 | \$24,462.00 | \$0.00 |
| | PO Box 480 Number Street Holtsville, NY 11742-0480 | As of the date you file, the claim is: Check all that apply. Contingent | | | |
| | City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ✓ No □ Yes | ☐ Unliquidated ☐ Disputed Type of PRIORITY unsecured claim: ☐ Domestic support obligations ☐ Taxes and certain other debts you owe the government ☐ Claims for death or personal injury while you were intoxicated ☐ Other. Specify | ı | | |

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Debtor 1 Tabatha Michelle Johnson Case number (if known) 25-13561

First Name Middle Name Last Name

| Pa | rt 1: Your PRIORITY Unsecured C | laims — Continuation Page | | | |
|-------|---|--|-------------|-----------------|--------------------|
| After | listing any entries on this page, number t | hem beginning with 2.3, followed by 2.4, and so forth. | Total claim | Priority amount | Nonpriority amount |
| 2.2 | State of New Jersey | Last 4 digits of account number | unknown | unknown | unknown |
| | Priority Creditor's Name INFO ONLY | When was the debt incurred? | | | |
| | PO Box 445 Number Street | As of the date you file, the claim is: Check all that apply. | | | |
| | Trenton, NJ 08695 | ☐ Contingent ☐ Unliquidated | | | |
| | City State ZIP Code Who incurred the debt? Check one. | ☐ Disputed | | | |
| | ✓ Debtor 1 only □ Debtor 2 only | Type of PRIORITY unsecured claim: ☐ Domestic support obligations | | | |
| | Debtor 1 and Debtor 2 only At least one of the debtors and another | ☐ Taxes and certain other debts you owe the government ☐ Claims for death or personal injury while you were intoxica | ted | | |
| | Check if this claim is for a community debt | ☑ Other. Specify | | | |
| | Is the claim subject to offset? ☑ No ☐ Yes | | | | |

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Debtor 1 __ Case number (if known) 25-13561 Tabatha Michelle Johnson Last Name

Middle Name

| Pa | art 2: List All of Your NONPRIORITY Unsecured | d Claims |
|-----|--|--|
| 3. | Do any creditors have nonpriority unsecured claims aga ☐ No. You have nothing to report in this part. Submit this fo ☐ Yes | • |
| 4. | nonpriority unsecured claim, list the creditor separately for ea | abetical order of the creditor who holds each claim. If a creditor has more than one ach claim. For each claim listed, identify what type of claim it is. Do not list claims already r claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured |
| | 1 | Total claim |
| 4.1 | ΑΙαΙ | Last 4 digits of account number |
| | Nonpriority Creditor's Name Attn: Bankruptcy Center | When was the debt incurred? |
| | 2270 Lakeside Blvd 7th Floor Number Street Richardson, TX 75082 City State ZIP Code | As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed |
| | Who incurred the debt? Check one. | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: |
| | Debtor 2 only | ☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as |
| | ☐ Debtor 1 and Debtor 2 only | priority claims |
| | At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar debts |
| | ☐ Check if this claim is for a community debt | ☑ Other. Specify |
| | Is the claim subject to offset? ☑ No □ Yes | |
| 4.2 | Bank of America | Last 4 digits of account number unknown |
| | Nonpriority Creditor's Name | When was the debt incurred? |
| | 100 N Tryon Street | when was the debt incurred: |
| | Number Street | |
| | | As of the date you file, the claim is: Check all that apply. |
| | Charlotte, NC 28255 | ☐ Contingent ☐ Unliquidated |
| | City State ZIP Code | ☐ Disputed |
| | Who incurred the debt? Check one. | Time of NONDRIGHTY impossing delains |
| | ☑ Debtor 1 only | Type of NONPRIORITY unsecured claim: |
| | ☐ Debtor 2 only | ☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as |
| | Debtor 1 and Debtor 2 only | priority claims |
| | At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar debts |
| | ☐ Check if this claim is for a community debt | ☑ Other. Specify |
| | Is the claim subject to offset? | |
| | ☑ No | |
| | ☐ Yes | |

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Debtor 1 Tabatha Michelle Johnson Case number (if known) 25-13561

First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims — Continuation Page

| Pa | rt 2: You | ir NONPRIORITY Uns | ecured Claims – | - Continuation Page | |
|-------|---------------------------|---|-------------------|---|---------------|
| After | · listing any er | ntries on this page, num | ber them beginnin | g with 4.4, followed by 4.5, and so forth. | Total claim |
| 4.3 | Chase Ban | k | | Last 4 digits of account number | unknown |
| | Nonpriority Cre | editor's Name | | | |
| | 270 Park Av | venue | | When was the debt incurred? | |
| | Number | Street | | • | |
| | | | | As of the date you file, the claim is: Check all that apply. | |
| | New York, I | NV 10017 | | Contingent | |
| | City | State | ZIP Code | Unliquidated | |
| | , | | 211 0000 | ☐ Disputed | |
| | _ | d the debt? Check one. | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 c | • | | ☐ Student loans | |
| | Debtor 2 c | • | | ☐ Obligations arising out of a separation agreement or divorce that you did | not report as |
| | | and Debtor 2 only ne of the debtors and anot | hor | priority claims | |
| | | this claim is for a commi | | Debts to pension or profit-sharing plans, and other similar debts | |
| | _ Oneck ii t | ins claim is for a commi | anity debt | ☑ Other. Specify | |
| | | subject to offset? | | | |
| | √ No | | | | |
| | ☐ Yes | | | | |
| 4.4 | Credit Collection Service | | | Last 4 digits of account number | \$5,312.00 |
| | Nonpriority Cre | editor's Name | | | |
| | 725 Canton | n St | | When was the debt incurred? | |
| | Number | Street | | • | |
| | | | | As of the date you file, the claim is: Check all that apply. | |
| | Norwood, N | MA 02062 | | Contingent | |
| | City | State | ZIP Code | - Unliquidated | |
| | , | | 211 0000 | ☐ Disputed | |
| | | d the debt? Check one. | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 c | | | ☐ Student loans | |
| | Debtor 2 c | • | | ☐ Obligations arising out of a separation agreement or divorce that you did | not report as |
| | | and Debtor 2 only ne of the debtors and anot | hor | priority claims | |
| | | this claim is for a commi | | Debts to pension or profit-sharing plans, and other similar debts | |
| | - CHECKIII | and claim is for a commit | anney webt | ☑ Other. Specify | |
| | | subject to offset? | | | |
| | ☑ No | | | | |
| | ☐ Yes | | | | |

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Debtor 1 Tabatha Michelle Johnson Case number (if known) 25-13561

Last Name

Middle Name

| Pa | art 2: | Your NONPRIORITY Unse | cured Claims - | - Continuation Page | | | |
|------|---|------------------------------|------------------|--|--------------|--|--|
| Afte | r listing an | y entries on this page, numb | er them beginnin | ng with 4.4, followed by 4.5, and so forth. | Total claim | | |
| 4.5 | Development | | | Last 4 digits of account number \$7,225. When was the debt incurred? | | | |
| | PO Box | Creditor's Name | | | | | |
| | Number | Street | | As of the date you file, the claim is: Check all that apply. Contingent Unliquidated | | | |
| | Trenton, City | , NJ 08625 State | ZIP Code | Disputed | | | |
| | Debtor Debtor Debtor At leas | • | | Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify | ot report as | | |
| 4.6 | Internal | Revenue Service | | Last 4 digits of account number \$3 | | | |
| | Nonpriority Creditor's Name PO Box 7346 Number Street | | | When was the debt incurred? | | | |
| | | | | As of the date you file, the claim is: Check all that apply. — Contingent | | | |
| | Philadel City | phia, PA 19101 State | ZIP Code | Unliquidated Disputed | | | |
| | Debtor Debtor Debtor At leas | | | Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did no priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify | ot report as | | |

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Debtor 1 Tabatha Michelle Johnson Case number (if known) 25-13561

Last Name

Middle Name

| Part | Your N | IONPRIORITY Unse | ecured Claims — | Continuation Page | | |
|----------------------------------|---|---|--------------------|--|-------------|--|
| After li | isting any entri | es on this page, numb | per them beginning | g with 4.4, followed by 4.5, and so forth. | Total claim | |
| ^ | Jefferson Capital Systems Nonpriority Creditor's Name 16 McLeland Rd Number Street | | | Last 4 digits of account number \$2, When was the debt incurred? As of the date you file, the claim is: Check all that apply. | | |
| V S C C C C Is | Debtor 1 only Debtor 2 only Debtor 1 and At least one o | State e debt? Check one. Debtor 2 only of the debtors and another claim is for a communication. | | ☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify | | |
| | Debtor 1 only Debtor 2 only Debtor 1 and At least one o | Street NJ 08505 State Debtor 2 only of the debtors and anotted a claim is for a communication. | | When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you dispriority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify | \$9,000.00 | |

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Debtor 1 Tabatha Michelle Johnson Case number (if known) 25-13561

Last Name

Middle Name

| Pa | rt 2: | Your NONPRIORITY Unsec | ured Claims – | - Continuation Page | | |
|-------|---|-----------------------------------|-----------------|--|--------------|--|
| After | listing a | ny entries on this page, numbe | r them beginnin | g with 4.4, followed by 4.5, and so forth. | Total claim | |
| 4.9 | Liberty | / Mutual | | Last 4 digits of account number | \$5,312.00 | |
| | • | ity Creditor's Name | | When was the debt incurred? | | |
| | c/o/ Cr | edit Collection Services | | <u></u> | | |
| | РО Во | x 55126 | | - As of the date you file, the claim is: Check all that apply. | | |
| | Number | Street | | Contingent | | |
| | Bosto | n, MA 02205 | | □ Unliquidated | | |
| | City | State | ZIP Code | Disputed | | |
| | Who inc | curred the debt? Check one. | | Type of NONPRIORITY unsecured claim: | | |
| | ✓ Debt | or 1 only | | ☐ Student loans | | |
| | _ | or 2 only | | ☐ Obligations arising out of a separation agreement or divorce that you did no | ot report as | |
| | | or 1 and Debtor 2 only | | priority claims | · | |
| | | ast one of the debtors and anothe | | Debts to pension or profit-sharing plans, and other similar debts | | |
| | ☐ Cne | ck if this claim is for a communi | ty debt | ☑ Other. Specify | | |
| | Is the cl | aim subject to offset? | | | | |
| | √ No | | | | | |
| | ☐ Yes | | | | | |
| 4.10 | LMV F | unding (Credit One - Pressle | er, Felt, | Last 4 digits of account number | \$2,062.04 | |
| | Warsh | aw) | | - When was the debt incurred? | | |
| | Nonprior | ity Creditor's Name | | when was the dept incurred? | | |
| | 7 Entir | n Road | | _ | | |
| | Number | Street | | As of the date you file, the claim is: Check all that apply. | | |
| | | | | ☐ Contingent | | |
| | Parsip | pany, NJ 07054 | | ☐ Unliquidated | | |
| | City | State | ZIP Code | - Disputed | | |
| | Who inc | curred the debt? Check one. | | Type of NONPRIORITY unsecured claim: | | |
| | ☑ Debt | or 1 only | | ☐ Student loans | | |
| | ☐ Debt | or 2 only | | Obligations arising out of a separation agreement or divorce that you did no | ot report as | |
| | ☐ Debt | or 1 and Debtor 2 only | | priority claims Debts to pension or profit-sharing plans, and other similar debts | | |
| | ☐ At le | ast one of the debtors and anothe | r | ✓ Other. Specify | | |
| | ☐ Check if this claim is for a community debt | | | | | |
| | Is the cl | aim subject to offset? | | | | |
| | ☑ No | | | | | |
| | ☐ Yes | | | | | |

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Debtor 1 Tabatha Michelle Johnson Case number (if known) 25-13561

Last Name

Middle Name

First Name

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Total claim LMV Funding (First Access - Pressler, Felt, Last 4 digits of account number \$606.92 When was the debt incurred? Nonpriority Creditor's Name 7 Entin Road As of the date you file, the claim is: Check all that apply. Number Street Contingent ■ Unliquidated Parsippany, NJ 07054 Disputed ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ■ Student loans **☑** Debtor 1 only Obligations arising out of a separation agreement or divorce that you did not report as Debtor 2 only priority claims ☐ Debtor 1 and Debtor 2 only ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ At least one of the debtors and another ✓ Other. Specify ☐ Check if this claim is for a community debt Is the claim subject to offset? **☑** No ☐ Yes 4.12 LVNV Funding Last 4 digits of account number \$1,974.00 Nonpriority Creditor's Name When was the debt incurred? PO Box 10584 Number Street As of the date you file, the claim is: Check all that apply. □ Contingent Greenville, SC 29603 ■ Unliquidated ZIP Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: **☑** Debtor 1 only ☐ Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as ☐ Debtor 1 and Debtor 2 only priority claims ■ At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt ✓ Other. Specify _ Is the claim subject to offset? **✓** No ☐ Yes

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Debtor 1 Tabatha Michelle Johnson Case number (if known) 25-13561

Last Name

Middle Name

| Pa | rt 2: Your NONPRIORITY Unsecured Claims — | Continuation Page | |
|-------|--|--|--------------|
| After | listing any entries on this page, number them beginning | g with 4.4, followed by 4.5, and so forth. | Total claim |
| 4.13 | LVNV Funding LLC | Last 4 digits of account number | \$606.00 |
| | Nonpriority Creditor's Name | When was the debt incurred? | |
| | c/o Resurgent Capital Services | | |
| | PO Box 1269 | - As of the date you file, the claim is: Check all that apply. | |
| | Number Street | Contingent | |
| | Greenville, SC 29603 | □ Unliquidated | |
| | City State ZIP Code | ☐ Disputed | |
| | Who incurred the debt? Check one. | Type of NONPRIORITY unsecured claim: | |
| | ☑ Debtor 1 only | ☐ Student loans | |
| | Debtor 2 only | ☐ Obligations arising out of a separation agreement or divorce that you did no | ot report as |
| | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | ☐ Check if this claim is for a community debt | ✓ Other. Specify | |
| | · | , | |
| | Is the claim subject to offset? ☑ No | | |
| | ☑ Yes | | |
| 4.14 | | | |
| 4.14 | Mariner Finance | Last 4 digits of account number | \$2,189.00 |
| | Nonpriority Creditor's Name | When was the debt incurred? | |
| | 1700 Nottingham Way Number Street | | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | |
| | Transfer N.I.00040 | Contingent | |
| | Trenton, NJ 08619 City State ZIP Code | - Unliquidated | |
| | • | ☐ Disputed | |
| | Who incurred the debt? Check one. | Type of NONPRIORITY unsecured claim: | |
| | ☑ Debtor 1 only | ☐ Student loans | |
| | ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only | ☐ Obligations arising out of a separation agreement or divorce that you did no | ot report as |
| | Debtor I and Debtor 2 only At least one of the debtors and another | priority claims | |
| | Check if this claim is for a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | - Oneok ii tilis claim is for a community debt | ☑ Other. Specify | |
| | Is the claim subject to offset? | | |
| | ☑ No | | |
| | ☐ Yes | | |

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Debtor 1 Tabatha Michelle Johnson Case number (if known) 25-13561

Last Name

Middle Name

| Pa | art 2: Your | NONPRIORITY Unsecured | l Claims - | – Continuation Page | | |
|------|---|---|------------|--|-------------------|--|
| Afte | r listing any ent | ries on this page, number the | m beginnir | ng with 4.4, followed by 4.5, and so forth. | Total claim | |
| 4.15 | NCB Manage | ement Services | | Last 4 digits of account number | \$10,808.34 | |
| | Nonpriority Cred | litor's Name | | When was the debt incurred? | | |
| | PO Box 1099 | | | <u></u> | | |
| | Debtor 1 on Debtor 2 on Debtor 1 an At least one Check if thi | State the debt? Check one. ly ly | ZIP Code | As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify | lid not report as | |
| 4.16 | NJ EZ-Pass Nonpriority Creditor's Name Atlantic City Expressway | | | Last 4 digits of account number unknown When was the debt incurred? | | |
| | PO Box 4971 | | | - | | |
| | Number | Street | | As of the date you file, the claim is: Check all that apply. Contingent | | |
| | Trenton, NJ | | | _ Unliquidated | | |
| | City | State | ZIP Code | ☐ Disputed | | |
| | Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? ✓ No Yes | | | Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not rep priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify | | |

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Debtor 1 Tabatha Michelle Johnson Case number (if known) 25-13561

Last Name

Middle Name

| Pa | rt 2: Your | NONPRIORITY Uns | ecured Claims — | Continuation Page | | | | | |
|------|---|---|--------------------|--|-----------|--|--|--|--|
| Afte | · listing any ent | tries on this page, num | ber them beginning | g with 4.4, followed by 4.5, and so forth. | tal claim | | | | |
| 4.17 | Schwartz Va | • | | Last 4 digits of account number | | | | | |
| | Nonpriority Creditor's Name 7255 Ne 4th Ave Unit 110-2 Number Street | | | When was the debt incurred? — As of the date you file, the claim is: Check all that apply. | | | | | |
| | Miami, FL 33 | 3138-5374 | | Contingent | | | | | |
| | City | State | ZIP Code | Unliquidated□ Disputed | | | | | |
| | Who incurred the debt? Check one. ✓ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ✓ No ☐ Yes | | | Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report a priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify | | | | | |
| 4.18 | Nonpriority Cred | Credit Systems LP ditor's Name | , | Last 4 digits of account number \$1,592.0 When was the debt incurred? | | | | | |
| | Number | Street | | As of the date you file, the claim is: Check all that apply. | | | | | |
| | Dallas, TX 7 | 5262 | | - ☐ Contingent - ☐ Unliquidated | | | | | |
| | City | State | ZIP Code | ☐ Disputed | | | | | |
| | Debtor 1 or Debtor 2 or Debtor 1 ar At least one Check if th | nly and Debtor 2 only e of the debtors and ano his claim is for a comm | | Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify | | | | | |
| | Is the claim subject to offset? ☑ No ☐ Yes | | | | | | | | |

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Debtor 1 Tabatha Michelle Johnson Case number (if known) 25-13561

Last Name

Middle Name

First Name

Your NONPRIORITY Unsecured Claims - Continuation Page Part 2: After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Total claim 4.19 **TD Bank** Last 4 digits of account number unknown Nonpriority Creditor's Name When was the debt incurred? 1701 Marlton Pike 200 As of the date you file, the claim is: Check all that apply. Contingent Cherry Hill, NJ 08003 Unliquidated ZIP Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: **☑** Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as ☐ Debtor 1 and Debtor 2 only priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt ✓ Other. Specify Is the claim subject to offset? **☑** No ☐ Yes \$2,661.80 Nonpriority Creditor's Name When was the debt incurred? c/o/ Ragan & Ragan, PC 3100 State Route 138 Ste 1 As of the date you file, the claim is: Check all that apply. Number Street Contingent Wall Township, NJ 07719-9021 ■ Unliquidated Citv State ZIP Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: ☑ Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as ☐ Debtor 1 and Debtor 2 only priority claims ■ At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt ✓ Other. Specify _ Is the claim subject to offset? **☑** No ☐ Yes

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Debtor 1 Tabatha Michelle Johnson Case number (if known) 25-13561

First Name Middle Name Last Name

| Pa | rt 2: | Your NONPRIORITY Unsecur | ed Claims — | Continuation Page | | | | |
|------|---|------------------------------------|-------------|--|--------------|--|--|--|
| Afte | r listing a | ny entries on this page, number th | em beginnin | g with 4.4, followed by 4.5, and so forth. | Total claim | | | |
| 4.21 | Wells Fargo Bank Nonpriority Creditor's Name 420 Montgomery Street | | | Last 4 digits of account number | unknown | | | |
| | | | | When was the debt incurred? | | | | |
| | Number | Street | | As of the date you file, the claim is: Check all that apply. | | | | |
| | San Fra | San Francisco, CA 94163 | | □ Contingent □ Unliquidated | | | | |
| | City | State | ZIP Code | ☐ Disputed | | | | |
| | Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt | | debt | Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did n priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify | ot report as | | | |
| | Is the cla ✓ No ☐ Yes | aim subject to offset? | | | | | | |

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Debtor 1

Tabatha Michelle Document Johnson

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__ Case number (if known) 25-13561

First Name Middle Name Last Name

Add the Amounts for Each Type of Unsecured Claim

| | | ts of certain types of unsecured claims. This information is s for each type of unsecured claim. | for sta | ntisti | cal reporting purposes only | /. 28 U.S.C. § |
|------------------------|-----|---|---------|--------|-----------------------------|----------------|
| | | | | | Total claim | |
| otal claims | 6a. | Domestic support obligations | 6a. | | \$0.00 | |
| mii Fait i | 6b. | Taxes and certain other debts you owe the government | 6b. | | \$0.00 | |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | | \$0.00 | |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | + | \$24,462.00 | |
| | 6e. | Total. Add lines 6a through 6d. | 6e. | Ī | \$24,462.00 | |
| | | | | | | |
| | | | | | Total claim | |
| tal claims m Part 2 | 6f. | Student loans | 6f. | | \$0.00 | |
| 7111 T UIT 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | | \$0.00 | |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | | \$0.00 | |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | + | \$85,965.91 | |
| | 6j. | Total. Add lines 6f through 6i. | 6j. | | \$85,965.91 | |

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| Fill in this inform | ation to identify yo | our case: | | | |
|---------------------|----------------------|-------------------------|-----------|---|---------------------------------|
| Debtor 1 | Tabatha | Michelle | Johnson | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States E | Bankruptcy Court f | or the: District of Nev | v Jersey | | |
| Case number | 25-13561 | | | | D |
| (if known) | | | | - | Check if this amended filing |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - 🗹 No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or co | ompany with whom you have th | e contract or lease | State what the contract or lease is for |
|-----|--------------|------------------------------|---------------------|---|
| 2.1 | | | | |
| | Name | | | |
| | Number | Street | | |
| | City | State | ZIP Code | |
| 2.2 | | | | |
| | Name | | | |
| | Number | Street | | |
| | City | State | ZIP Code | |
| 2.3 | | | | |
| | Name | | | |
| | Number | Street | | |
| | City | State | ZIP Code | |
| 2.4 | | | | |
| | Name | | | |
| | Number | Street | | |
| | City | State | ZIP Code | |

| Fill in this inform | ation to identify yo | | | | | | | | |
|---------------------|--|-------------|-----------|---|--|------------------------------------|--|--|--|
| Debtor 1 | Tabatha | Michelle | Johnson | | | | | | |
| | First Name | Middle Name | Last Name | | | | | | |
| Debtor 2 | | | | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | | | | |
| United States E | United States Bankruptcy Court for the: District of New Jersey | | | | | | | | |
| Case number | 25-13561 | | | _ | | | | | |
| (if known) | | | | _ | | Check if this is an amended filing | | | |

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

| | | Page to this page. On the top of | ir any Additional Fages, write your name and case number (ii | | | | | |
|---|---|--|---|--|--|--|--|--|
| Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.) ✓ No | | | | | | | | |
| ☐ Yes | | | | | | | | |
| | | | | | | | | |
| ☑ No. Go to line 3 | 3 . | | | | | | | |
| Yes. Did your sp | pouse, former spouse, or legal equ | uivalent live with you at the time? | | | | | | |
| ☐ No | | | | | | | | |
| Yes. In which | ch community state or territory did | you live? | Fill in the name and current address of that person. | | | | | |
| Name of yo | our spouse, former spouse, or lega | al equivalent | | | | | | |
| Number | Street | | | | | | | |
| City | State | ZIP Code | | | | | | |
| 2 again as a codel Schedule E/F (Offi | otor only if that person is a guar icial Form 106E/F), or <i>Schedule</i> | antor or cosigner. Make sure yo | ou have listed the creditor on Schedule D (Official Form 106D), nedule D, Schedule E/F, or Schedule G to fill out Column 2. | | | | | |
| Column 1: Your co | debtor | | Column 2: The creditor to whom you owe the debt | | | | | |
| | | | Check all schedules that apply: | | | | | |
| Name | | | Schedule D, line | | | | | |
| Nume | | | ☐ Schedule E/F, line | | | | | |
| Number | Street | | | | | | | |
| | | | ☐ Schedule G, line | | | | | |
| City | State | ZIP Cod | de | | | | | |
| | | | Schedule D, line | | | | | |
| Name | | | | | | | | |
| Number | Street | | Schedule E/F, line | | | | | |
| | | | ☐ Schedule G, line | | | | | |
| City | State | ZIP Cod | de | | | | | |
| | Do you have any of No Yes Within the last 8 y California, Idaho, Low No. Go to line 3 Yes. Did your sport No Yes. In which Name of your Number City In Column 1, list a 2 again as a codel Schedule E/F (Office Column 1: Your company Number City Name Number City Name Number | Do you have any codebtors? (If you are filing a join of No | Do you have any codebtors? (If you are filing a joint case, do not list either spouse as | | | | | |

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| Fill in this inform | nation to identify yo | our case: | | |
|---------------------|-----------------------|-------------------------|--|-------------------------------------|
| Debtor 1 | Tabatha | Michelle | Johnson | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | Check if this is: |
| United States E | Bankruptcy Court f | for the: District of Ne | An amended filingA supplement showing postpetition chapte | |
| Case number | 25-13561 | | | 13 income as of the following date: |
| (if known) | | | | MM / DD / YYYY |

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| | Part 1: Describe Employn | | d case num | ber (if kno | wn). Answer every (| question. | | | |
|----|--|-----------------------------------|--------------|---------------------------|-------------------------|------------------------|---------------------------|------------------|--|
| 1. | Fill in your employment information. | | Debtor 1 | | | Debtor 2 | 2 or non-filing sp | ouse | |
| | If you have more than one job, Employment status | | | ☑ Employed ☐ Not employed | | | ☐ Employed ☐ Not employed | | |
| | Include part-time, seasonal, or self-employed work. | Occupation Employer's name | State of | New Jers | ey | | | | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | PO Box 207 | | | | | | |
| | | | Number | Street | | Number | Street | | |
| | | | Trenton, | N I 08625 | • | | | | |
| | | | City | Stat | | City | State | ZIP Code | |
| | | How long employed there? | | | | | | | |
| | Part 2: Give Details Abou | t Monthly Income | | | | | | | |
| | Estimate monthly income as of unless you are separated. | the date you file this form. If y | you have not | hing to rep | ort for any line, write | \$0 in the spac | e. Include your no | on-filing spouse | |
| | If you or your non-filing spouse habelow. If you need more space, at | | | formation f | or all employers for th | nat person on | the lines | | |
| | | | | _ | For Debtor 1 | For Debt non-filing | or 2 or g spouse | | |
| 2. | List monthly gross wages, salar deductions). If not paid monthly, c | | | 2. | \$6,718.00 | | \$0.00 | | |
| 3. | Estimate and list monthly overti | ime pay. | | 3. + | \$0.00 | + | \$0.00 | | |
| 4. | Calculate gross income. Add line | e 2 + line 3. | | 4. | \$6,718.00 | | \$0.00 | | |

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Debtor 1 Tabatha Michelle Johnson Case number (if known) 25-13561

Last Name

Middle Name

| | | For Debtor 1 | For Debtor 2 or non-filing spouse | |
|--|--------------|--------------------------|-----------------------------------|------------|
| Copy line 4 here | 4. | \$6,718.00 | \$0.00 | |
| 5. List all payroll deductions: | | | | |
| 5a. Tax, Medicare, and Social Security deductions | 5a. | \$1,034.00 | \$0.00 | |
| 5b. Mandatory contributions for retirement plans | 5b. | \$503.00 | \$0.00 | |
| 5c. Voluntary contributions for retirement plans | 5c. | \$0.00 | \$0.00 | |
| 5d. Required repayments of retirement fund loans | 5d. | \$494.00 | \$0.00 | |
| 5e. Insurance | 5e. | \$531.00 | \$0.00 | |
| 5f. Domestic support obligations | 5f. | \$0.00 | \$0.00 | |
| 5g. Union dues | 5g. | \$0.00 | \$0.00 | |
| 5h. Other deductions. Specify: | 5h. + | \$0.00 | + \$0.00 | |
| 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h. | 6. | \$2,562.00 | \$0.00 | |
| 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$4,156.00 | \$0.00 | |
| 8. List all other income regularly received: | | | | |
| 8a. Net income from rental property and from operating a business, profession, or farm | | | | |
| Attach a statement for each property and business showing gross receipts ordinary and necessary business expenses, and the total monthly net income. | 8a. | \$0.00 | \$0.00 | |
| 8b. Interest and dividends | 8b. | \$0.00 | \$0.00 | |
| 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive | | | | |
| Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c. | \$0.00 | \$0.00 | |
| 8d. Unemployment compensation | 8d. | \$0.00 | \$0.00 | |
| 8e. Social Security | 8e. | \$0.00 | \$0.00 | |
| 8f. Other government assistance that you regularly receive | | | | |
| Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. | | | | |
| Specify: | 8f. | \$0.00 | \$0.00 | |
| 8g. Pension or retirement income | 8g. | \$0.00 | \$0.00 | |
| 8h. Other monthly income. Specify: | 8h. 🕇 | \$0.00 | +\$0.00 | |
| 9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. | 9. | \$0.00 | \$0.00 | |
| 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. | \$4,156.00 | \$0.00 | \$4,156.00 |
| 11. State all other regular contributions to the expenses that you list in Sched | ule J. | | | |
| Include contributions from an unmarried partner, members of your household, yearing friends or relatives. | our depe | endents, your roommate | es, and other | |
| Do not include any amounts already included in lines 2-10 or amounts that are r | ot avail | able to pay expenses lis | sted in Schedule J. | |
| Specify: | | | 11. + | \$0.00 |

Filed 05/01/25 Entered 05/01/25 14:26:35 Case 25-13561-MEH Doc 10 Desc Main Document Page 31 of 53 Case number (if known) 25-13561 Debtor 1 **Tabatha** Michelle Johnson First Name Middle Name Last Name 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. \$4,156.00 12. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? ✓ No. Yes. Explain:

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| to identify your case: | | | |
|---|---|--|---|
| Tabatha First Name | Michelle | Johnson | Check if this is: |
| First Name | Middle Name | Last Name | ☐ An amended filing |
| First Name | Middle Name | Last Name | A supplement showing postpetition cha expenses as of the following date: |
| United States Bankruptcy Court for the: | | District of New Jersey | |
| 25-13561 | | | IMIMI / DD / YYYY |
| | Tabatha First Name First Name ruptcy Court for the: | First Name Middle Name First Name Middle Name | Tabatha Michelle Johnson First Name Middle Name Last Name First Name Middle Name Last Name ruptcy Court for the: District of New Jersey |

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1: Describe Your Household | d | | | | | | | |
|--|--|--|-----------------------|--|--|--|--|--|
| 1. Is this a joint case? No. Go to line 2. Yes. Does Debtor 2 live in a sep | | Separate Household of Debtor 2. | | | | | | |
| 2. Do you have dependents? Do not list Debtor 1 and Debtor 2. Do not state the dependents' names. | ☐ No ☑ Yes. Fill out this information for each dependent | Dependent's relationship to Debtor 1 or Debtor 2 Child Child | Dependent's age 25 27 | Does dependent live with you? No. Yes. No. Yes. No. Yes. No. Yes. No. Yes. | | | | |
| Do your expenses include expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing N | ☑ No ☐ Yes Monthly Expenses | | | | | | | |
| Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I: Your Income</i> (Official Form 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. \$2,048.00 | | | | | | | | |
| If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or rent 4c. Home maintenance, repair, and 4d. Homeowner's association or co | d upkeep expenses | | 4a 4b 4c 4d | \$0.00 \$0.00 \$0.00 \$0.00 | | | | |

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Debtor 1 Tabatha Michelle Johnson Case number (if known) 25-13561

Last Name

First Name

Middle Name

| | First Name Middle Name Last Name | | |
|----|--|------|---------------|
| | | | Your expenses |
| 5. | Additional mortgage payments for your residence, such as home equity loans | 5. | \$0.00 |
| | Utilities: | | |
| | 6a. Electricity, heat, natural gas | 6a. | \$150.00 |
| | 6b. Water, sewer, garbage collection | 6b. | \$50.00 |
| | 6c. Telephone, cell phone, Internet, satellite, and cable services | 6c. | \$90.00 |
| | 6d. Other. Specify: | 6d. | \$180.00 |
| | Food and housekeeping supplies | 7. | \$300.00 |
| | Childcare and children's education costs | 8. | \$0.00 |
| | Clothing, laundry, and dry cleaning | 9. | \$0.00 |
| 0. | Personal care products and services | 10. | \$0.00 |
| 1. | Medical and dental expenses | 11. | \$0.00 |
| | Transportation. Include gas, maintenance, bus or train fare. | 10 | \$0.00 |
| | Do not include car payments. | 12. | |
| 3. | Entertainment, clubs, recreation, newspapers, magazines, and books | 13. | \$100.00 |
| 4. | Charitable contributions and religious donations | 14. | \$0.00 |
| | Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. | | |
| | 15a. Life insurance | 15a. | \$0.00 |
| | 15b. Health insurance | 15b. | \$0.00 |
| | 15c. Vehicle insurance | 15c. | \$360.00 |
| | 15d. Other insurance. Specify: | 15d. | \$0.00 |
| 3. | Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. | | |
| | Specify: | 16. | \$0.00 |
| 7. | Installment or lease payments: | | |
| | 17a. Car payments for Vehicle 1 2018 Nissan Maxima | 17a. | \$266.00 |
| | 17b. Car payments for Vehicle 2 2019 INFINITI Q50 | 17b. | \$600.00 |
| | 17c. Other. Specify: | 17c. | \$0.00 |
| | 17d. Other. Specify: | 17d. | \$0.00 |
| | Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I). | 18. | \$0.00 |
| | Other payments you make to support others who do not live with you. | .0. | |
| | Specify: | 19. | \$0.00 |
| | Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. | | |
| | 20a. Mortgages on other property | 20a. | \$0.00 |
| | 20b. Real estate taxes | 20b. | \$0.00 |
| | 20c. Property, homeowner's, or renter's insurance | 20c. | \$0.00 |
| | 20d. Maintenance, repair, and upkeep expenses | 20d. | \$0.00 |
| | 20e. Homeowner's association or condominium dues | 20e. | \$0.00 |

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Debtor 1 **Tabatha** Michelle Johnson Case number (if known) 25-13561 First Name Middle Name Last Name 21. Other. Specify: 21. \$0.00 22. Calculate your monthly expenses. 22a. \$4,144.00 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22b. \$0.00 22c. Add line 22a and 22b. The result is your monthly expenses. 22c. \$4,144.00 23. Calculate your monthly net income. 23a. \$4,156.00 23a. Copy line 12 (your combined monthly income) from Schedule I. 23b. 23b. Copy your monthly expenses from line 22c above. \$4,144.00 23c. Subtract your monthly expenses from your monthly income. \$12.00 The result is your monthly net income. 23c. 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? **✓** No. Yes.

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| Fill in this information | to identify your cas | se: | | |
|--|----------------------|-------------|-----------|--|
| Debtor 1 | Tabatha | Michelle | Johnson | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: District of New Jers | | | | |
| Case number (if known) | 25-135 | 61 | | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all

| of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page. | | | | | |
|--|-----------------------------------|--|--|--|--|
| Part 1: Summarize Your Assets | | | | | |
| | Your assets Value of what you own | | | | |
| 1. Schedule A/B: Property (Official Form 106A/B) | \$200.000.00 | | | | |
| 1a. Copy line 55, Total real estate, from Schedule A/B | \$322,000.00 | | | | |
| 1b. Copy line 62, Total personal property, from Schedule A/B | \$26,600.00 | | | | |
| 1c. Copy line 63, Total of all property on Schedule A/B | \$348,600.00 | | | | |
| Part 2: Summarize Your Liabilities | _ | | | | |
| | Your liabilities Amount you owe | | | | |
| Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$303,284.00 | | | | |
| 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$24,462.00 | | | | |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | + \$85,965.91 | | | | |
| Your total liabilities | \$413,711.91 | | | | |
| Part 3: Summarize Your Income and Expenses | | | | | |
| 4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$4,156.00 | | | | |
| Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$4,144.00 | | | | |
| | . , , | | | | |

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Debtor 1 Tabatha Michelle Johnson Case number (if known) 25-13561

Last Name

First Name

Middle Name

| Part 4: Answer These Questions for Administrative and Statistical Records | | | | | | | |
|---|-------------|---|--|--|--|--|--|
| Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes | | | | | | | |
| What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. | | | | | | | |
| 3. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Form 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14. | \$6,718.00 | | | | | | |
| 2. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: | Total claim | | | | | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$0.00 | | | | | | |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$0.00 | | | | | | |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$0.00 | | | | | | |
| 9d. Student loans. (Copy line 6f.) | \$0.00 | | | | | | |
| 9e.Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$0.00 | | | | | | |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$0.00 | l | | | | | |
| 9g. Total . Add lines 9a through 9f. | \$0.00 | | | | | | |

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| Fill in this information | to identify your case: | | | |
|---------------------------|------------------------|-------------|------------------------|--|
| Debtor 1 | Tabatha | Michelle | Johnson | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States Bankı | ruptcy Court for the: | | District of New Jersey | |
| Case number (if known) | 25-13561 | <u> </u> | | |

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| u may ar agree to new compone who is NOT | on atternov to halo vev fill out handwinter forms? |
|---|---|
| | an attorney to help you fill out bankruptcy forms? |
| No Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
| | |
| | |
| nder penalty of perjury, I declare that I have read | the summary and schedules filed with this declaration and that they are true and correct. |
| nder penalty of perjury, I declare that I have read | the summary and schedules filed with this declaration and that they are true and correct. |
| | the summary and schedules filed with this declaration and that they are true and correct. |
| Inder penalty of perjury, I declare that I have read Index | the summary and schedules filed with this declaration and that they are true and correct. |
| /s/ Tabatha Michelle Johnson | the summary and schedules filed with this declaration and that they are true and correct. |

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| Fill in this information | to identify your case: | | | |
|--------------------------|------------------------|-------------|------------------------|--|
| Debtor 1 | _Tabatha | Michelle | Johnson | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States Bankr | uptcy Court for the: | | District of New Jersey | |
| Case number (if known) | 25-13561 | | | |

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/25

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| . What is your current marital status? | | | | |
|--|--|---|-------------------------------|-------------------------------------|
| Married | | | | |
| ☐ Not married | | | | |
| . During the last 3 years, have you lived an | nywhere other than where y | ou live now? | | |
| ☑ No | | | | |
| Yes. List all of the places you lived in the | ne last 3 years. Do not includ | le where you live now. | | |
| . Within the last 8 years, did you ever live werritories include Arizona, California, Idaho, I No Yes. Make sure you fill out Schedule H. Explain the Sources of Your I | Louisiana, Nevada, New Me | xico, Puerto Rico, Texas, W | | |
| ill in the total amount of income you receive | d from all jobs and all busine | esses, including part-time a | ctivities. | vears? |
| ill in the total amount of income you receive | d from all jobs and all busine | esses, including part-time a | ctivities. | vears? |
| ill in the total amount of income you receive you are filing a joint case and you have inco | d from all jobs and all busine | esses, including part-time a | ctivities. | vears? |
| ill in the total amount of income you receive you are filing a joint case and you have inco | d from all jobs and all busine | esses, including part-time a | ctivities. | vears? |
| ill in the total amount of income you receive you are filing a joint case and you have inco | ed from all jobs and all busing ome that you receive togeth | esses, including part-time a | ctivities. ebtor 1. | vears? Gross Income |
| ill in the total amount of income you receive you are filing a joint case and you have inco | ed from all jobs and all busing ome that you receive together the business of | esses, including part-time a er, list it only once under De | ctivities. ebtor 1. Debtor 2 | |
| | d from all jobs and all busing ome that you receive together the property of t | esses, including part-time a er, list it only once under De Gross Income (before deductions and | Debtor 2 Sources of income | Gross Income (before deductions and |

| | | | | Document | Page 39 of 53 | 3 |
|--|---|------------------------------------|--|--|---|---|
| ebtor 1 | Taba | ıtha | Michelle | Johnson | - | Case number (if known) 25-13561 |
| | First N | Name | Middle Nam | ne Last Name | | |
| Familiant | | | | ☑ Wages, commissions, | | ☐ Wages, commissions. |
| | calendar y | /ear: ember 31, <i>1</i> | | vvages, commissions,bonuses, tips | To be provided | ☐ Wages, commissions, bonuses, tips |
| (Januar) | 7 I to Dece | ilibei 31, <u>7</u> | | Operating a business | | Operating a business |
| For the | calendar v | ear before | that: | ✓ Wages, commissions, | | ☐ Wages, commissions, |
| | - | ember 31, 2 | | bonuses, tips | To be provided | bonuses, tips |
| | | | | Operating a business | | Operating a business |
| Include inc | come regar efit payme | rdless of wh | nether that inco | • | other income are alimony ey collected from lawsuits | r; child support; Social Security, unemployment, and other s; royalties; and gambling and lottery winnings. If you are |
| | - | | | | | |
| Yes. | Fill in the | details. | | | | |
| | | | | | | |
| Part 3: L | ist Certa | in Payme | ents You Mad | de Before You Filed for | Bankruptcy | |
| | | | <u> </u> | | | |
| 6. Are eith | er Debtor ' | 1's or Debto | or 2's debts pri | marily consumer debts? | | |
| ☐ No. | an indivi | dual primar | ily for a person | s primarily consumer debts al, family, or household purp d for bankruptcy, did you pay | oose." | fined in 11 U.S.C. § 101(8) as "incurred by |
| | _ | • | • | a for barikruptcy, did you pay | y arry creditor a total of pe | ,,oro di more: |
| | _ | So to line 7. | | | | |
| | ☐ Yes. | paid that | creditor. Do no | | estic support obligations, | r more payments and the total amount you such as child support and alimony. Also, do |
| | * Subjec | t to adjustm | nent on 4/01/28 | and every 3 years after tha | t for cases filed on or afte | er the date of adjustment. |
| √ Yes. | Debtor 1 | or Debtor | 2 or both have | primarily consumer debts | | |
| | During th | ne 90 days | before you filed | d for bankruptcy, did you pay | y any creditor a total of \$6 | 500 or more? |
| | √ No. € | o to line 7. | | | | |
| | ☐ Yes. | include pa | | mestic support obligations, s | | al amount you paid that creditor. Do not alimony. Also, do not include payments to |
| Insiders in you are an operate as ✓ No | clude your officer, di a sole pro | relatives; a rector, pers | any general par on in control, o U.S.C. § 101. I | r owner of 20% or more of the | ral partners; partnerships heir voting securities; and | yone who was an insider? of which you are a general partner; corporations of which I any managing agent, including one for a business you uch as child support and alimony. |
| | | | | cy, did you make any paymo | ents or transfer any prop | perty on account of a debt that benefited an insider? |
| ✓ No | , | - J | | , | | |
| | liot all sec | monto that | honofited on in | oidor | | |
| Yes. | ∟ıst all pay | ments that | benefited an in | isiuer. | | |
| | | | | | | |

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Case 25-13561-MEH Doc 10 Filed 05/01/25 Entered 05/01/25 14:26:35 Desc Main Page 40 of 53 Document Debtor 1 **Tabatha** Michelle Johnson Case number (if known) 25-13561 First Name Middle Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and □No Yes. Fill in the details. Nature of the case Status of the case Court or agency Former landlord is suing Case title **✓** Pending **Superior Court of New Jersey** debtor Court Name On appeal Case number **MER-DC-001965-23** 175 S Broad Street, First Floor □ Concluded **PO Box 8068** Number Street Trenton, NJ 08650 City State ZIP Code 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? **√** No Yes. Fill in the details. 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a courtappointed receiver, a custodian, or another official? **√** No Yes List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? **√**No Yes. Fill in the details for each gift or contribution.

Page 41 of 53 Document Debtor 1 Tabatha Michelle Johnson Case number (if known) 25-13561 First Name Middle Name Last Name List Certain Losses Part 6: 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? **√** No Yes. Fill in the details. List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. □No Yes. Fill in the details. Description and value of any property transferred Date payment or Amount of payment transfer was made **Jenkins Law Group** Person Who Was Paid Attorney's Fee 02/01/2025 \$2,698.00 412 S. Whitehorse Pike Number Street Audubon, NJ 08106 ZIP Code City State Email or website address Person Who Made the Payment, if Not You 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. **☑** No Yes. Fill in the details. 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. **√** No Yes. Fill in the details. 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) **✓** No Yes. Fill in the details.

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| ebtor 1 | Tabatha | Michelle | Johnson | Case number (if known) 25-13561 |
|-----------------------|--|---|-------------------------------|--|
| | First Name | Middle Name | Last Name | |
| Part 8: | List Certain Finand | cial Accounts, Ins | truments, Safe Deposi | t Boxes, and Storage Units |
| or transf | erred? | | | or instruments held in your name, or for your benefit, closed, sold, moved, sof deposit; shares in banks, credit unions, brokerage houses, pension |
| | operatives, association | | | • |
| ☑ No | | | | |
| Yes | . Fill in the details. | | | |
| | | | | |
| 21. Do ye valuable | | ou have within 1 year | before you filed for bankru | ptcy, any safe deposit box or other depository for securities, cash, or other |
| √ No | | | | |
| □Yes | . Fill in the details. | | | |
| | | | | |
| 22 Have | you stored property i | n a storago unit or nis | aca other than your home | within 1 year before you filed for bankruptcy? |
| _ | you stored property i | ir a storage unit or pie | ice other than your nome v | within 1 year before you med for bankruptcy? |
| √ No | | | | |
| Yes | . Fill in the details. | | | |
| | | | | |
| Part 9: | Identify Property | You Hold or Contro | ol for Someone Else | |
| | | | | |
| 23. Do y | ou hold or control any | property that someon | ne else owns? Include any | property you borrowed from, are storing for, or hold in trust for someone. |
| √ No | | | | |
| ☐Yes | . Fill in the details. | | | |
| _ | | | | |
| | | | | |
| Part 10: | Give Details Abou | ut Environmental I | nformation | |
| For the r | urnaca of Part 10, the | following definitions | annly | |
| • | ourpose of Part 10, the conmental law means a | - | | ncerning pollution, contamination, releases of hazardous or toxic |
| subs | | terial into the air, land, | soil, surface water, ground | water, or other medium, including statutes or regulations controlling the |
| | means any location, fa ilize it, including dispos | | efined under any environme | ental law, whether you now own, operate, or utilize it or used to own, operate, |
| | ardous material means tant, contaminant, or s | | iental law defines as a haza | ardous waste, hazardous substance, toxic substance, hazardous material, |
| • | | | ou know about, regardless | of when they occurred. |
| 24. Has a | nny governmental unit | notified vou that vou | ı mav be liable or potentiall | y liable under or in violation of an environmental law? |
| √ No | , , | , | , | , |
| | | | | |
| ☐ Yes | . Fill in the details. | | | |
| | | | | |
| 25. Have | you notified any gove | ernmental unit of any | release of hazardous mate | rial? |
| √ No | | | | |
| Yes | . Fill in the details. | | | |
| | | | | |
| | | | | |

Doc 10 Filed 05/01/25 Entered 05/01/25 14:26:35 Desc Main Case 25-13561-MEH Page 43 of 53 Document Debtor 1 **Tabatha** Michelle Johnson Case number (if known) 25-13561 First Name Middle Name Last Name 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. **✓** No Yes. Fill in the details. Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions,

creditors, or other parties.

☐ Yes. Fill in the details below.

✓ No

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Case number (if known) 25-13561

Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Johnson

| ח | ρ | ht | 'n | ۱r | 1 |
|---|---|----|----|----|---|

Tabatha

☐ Yes. Name of person _

Michelle

| | First Name | Middle Name | Last Name |
|----------------------|--|-----------------------------------|---|
| | | | |
| Part 12: Sig | n Below | | |
| and correct. I | understand that ma | aking a false statement | Affairs and any attachments, and I declare under penalty of perjury that the answers are true concealing property, or obtaining money or property by fraud in connection with a apprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| • | batha Michelle J re of Tabatha Miche | lohnson elle Johnson, Debtor 1 | |
| Date <u>0</u> | 5/01/2025 | - | |
| Did you attach | n additional pages | to your <i>Statement of Fi</i> | nancial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? |
| Yes | | | |
| Did you pay o | r agree to pay som | eone who is not an atto | rney to help you fill out bankruptcy forms? |
| √ 1No | | | |

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| Fill in this information | to identify your case: | | | |
|---------------------------|------------------------|-------------|-----------------------|----------|
| Debtor 1 | Tabatha | Michelle | Johnson | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States Bankr | uptcy Court for the: | | District of New Jerse | <u> </u> |
| Case number (if known) | 25-13561 | <u> </u> | | |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

| art 1: List You | ur Creditors Who Have Secured Clair | ms | |
|--|---|---|---|
| For any creditor below. | rs that you listed in Part 1 of Schedule D: C | reditors Who Have Claims Secured by Property (Official Form | 106D), fill in the information |
| Identify the cre | ditor and the property that is collateral | What do you intend to do with the property that secures a debt? | Did you claim the property as exempt on Schedule C? |
| Creditor's name: | American Credit Acceptance | ☐ Surrender the property.☐ Retain the property and redeem it. | ☑ No ☐ Yes |
| Description of property securing debt: | 2019 INFINITI Q50 | ☐ Retain the property and enter into a Reaffirmation Agreement.☑ Retain the property and [explain]: | |
| Creditor's | Conital One Auto Finance | ☐ Surrender the property. | ☑ No |
| Description of property securing debt: | Capital One Auto Finance 2018 Nissan Maxima | ☐ Retain the property and redeem it. ☐ Retain the property and enter into a Reaffirmation Agreement. ☑ Retain the property and [explain]: | Yes |

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Debtor 1 **Tabatha** Michelle **Johnson** Case number (if known) 25-13561 First Name Middle Name Last Name **Additional Page for Part 1** ☐ No ☐ Surrender the property. Creditor's M&T Bank name: **√** Yes Retain the property and redeem it. Description of 12 Leicester Lane Trenton, NJ 08628 ☐ Retain the property and enter into a property Reaffirmation Agreement. securing debt: A Retain the property and [explain]: **✓** No Creditor's ☐ Surrender the property. **Mariner Finance** name: ☐ Yes ☐ Retain the property and redeem it. Description of Retain the property and enter into a

Reaffirmation Agreement.

A Retain the property and [explain]:

property

securing debt:

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| Debtor 1 | Tabatha | Michelle | Johnson | Case number (if known) 25-13561 |
|----------|------------|-------------|-----------|---------------------------------|
| | First Name | Middle Name | Last Name | |

| xpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2 | |
|---|--|
| Describe your unexpired personal property leases | Will the lease be assumed? |
| essor's name: | ☐ No |
| Description of leased roperty: | ☐ Yes |
| essor's name: | ☐ No |
| Description of leased roperty: | ☐ Yes |
| essor's name: | □ No |
| Description of leased roperty: | ☐ Yes |
| essor's name: | □ No |
| Description of leased roperty: | ☐ Yes |
| essor's name: | □ No |
| Description of leased roperty: | ☐ Yes |
| essor's name: | □ No |
| Description of leased roperty: | ☐ Yes |
| essor's name: | □ No |
| Description of leased roperty: | ☐ Yes |
| t 3: Sign Below | |
| nder penalty of perjury, I declare that I have indicated my intention about any propert operty that is subject to an unexpired lease. | ty of my estate that secures a debt and any personal |
| | |

| | | OE 10E61 ME | | Filad OF | 101/25 | -ntoro | 05/ | | Doca Ma | |
|-----------------------------|--|---|--|---------------------------------|---------------------------------|-------------------|----------------------|---|--|----------------------------------|
| Fill | I in this information | to identify your cas | e: | | | | | Form 122A-15 | ox only as directed in this Supp: | form and in |
| D | ebtor 1 | Tabatha | Michelle | Johnson | | | . [| 1 1. There is | no presumption of abus | e. |
| | | First Name | Middle Name | Last Name | | | | _ | culation to determine if a | |
| | Debtor 2 Spouse, if filing) | First Name | Middle Name | Last Name | | | - | of abuse a | pplies will be made unde | er Chapter 7 |
| - | - | | ъ. | | | | | _ | st Calculation (Official Fo | , |
| U | Inited States Bankri | uptcy Court for the: | Di | strict of Ne | w Jersey | | - | → 3. The Mean of qualified the second | ans Test does not apply I military service but it co | now because ould apply later. |
| _ | ase number f known) | 25-135 | <u> </u> | | | | | | nis is an amended filing | |
| (| | | | | | | | ☐ Check if the | nis is an amended filing | |
| Of | fficial Form | 122A-1 | | | | | | | | |
| \sim | nantar 7 (| Statomor | ot of Vour (| urron | t Mont | hlvi | nco | mo | | 10/10 |
| | | | nt of Your C | | | | | | | 12/19 |
| atta and beca with | ch a separate shee case number (if ki ause of qualifying n this form. | et to this form. Incl nown). If you believ military service, co | ude the line number to the that you are exemped that you are exemped that exemple the and file State | o which the a | additional inforesumption of | ormation of abuse | applies because | . On the top of you do not ha | ing accurate. If more sp any additional pages, v ave primarily consumer 707(b)(2) (Official Form | vrite your name debts or |
| Pa | art 1: Calculate | Your Current M | onthly Income | | | | | | | |
| 1. | _ | _ | s? Check one only. | | | | | | | |
| | | Fill out Column A, li | | h O-l A | and D. Passa | 0.44 | | | | |
| | | | g with you. Fill out bot filing with you. You a | | | 2-11. | | | | |
| | | | tiling with you. You a | | | olumn A | and B. lis | 000 2 11 | | |
| | _ | | | - | | | | | ng this box, you declare | |
| | under pe | nalty of perjury that | you and your spouse easons that do not inc | are legally s | eparated und | er nonba | inkruptcy | law that applie | es or that you and your | |
| va ex | 01(10A). For examparied during the 6 m | ple, if you are filing nonths, add the inc | on September 15, the ome for all 6 months a | 6-month per and divide the | riod would be total by 6. Fi | March 1 | through esult. Do | August 31. If the not include an | le this bankruptcy case ne amount of your month ny income amount more to ve nothing to report for a | lly income than once. For |
| | | | | | | | Colu. Debt | mn A or 1 | Column B Debtor 2 or non-filing spouse | |
| 2. | Your gross wage deductions). | s, salary, tips, bon | uses, overtime, and c | ommissions | (before all pa | ayroll | | \$6,718.00 | \$0.00 | |
| 3. | Alimony and mai is filled in. | intenance payment | s. Do not include pay | ments from a | spouse if Co | lumn B | | \$0.00 | \$0.00 | |
| 4. | your dependents unmarried partner roommates. Include | s, including child su r, members of your | are regularly paid fo upport. Include regula household, your depe tions from a spouse of ne 3. | r contribution endents, pare | ns from an ents, and | • | | \$0.00 | \$0.00 | |
| 5. | Net income from or farm | operating a busine | ess, profession, | Debtor 1 | Debtor 2 | | | | | |
| | Gross receipts (be | efore all deductions | (.) | \$0.00 | \$0.00 | | | | | |
| | Ordinary and nec | essary operating ex | rpenses - | \$0.00 | - \$0.00 | | | | | |
| | Net monthly incor | me from a business | , profession, or farm | \$0.00 | \$0.00 | Copy here → | | \$0.00 | \$0.00 | |
| 6. | Net income from | rental and other re | al property | Debtor 1 | Debtor 2 | | | | | |
| | | efore all deductions | | \$0.00 | \$0.00 | | | | | |
| | | essary operating ex | • | \$0.00 | - \$0.00 | | | | | |
| | - | | Г | | | Сору | | | | |
| | Net monthly incor | me from rental or ot | her real property | \$0.00 | \$0.00 | here | | \$0.00 | \$0.00 | |
| 7 | Interest, dividend | de and rovaltica | | | | , | | \$0.00 | \$0.00 | |
| 1. | muciesi, dividenc | as, and rovalles | | | | | | 40.00 | ΨΟ.ΟΟ | |

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| De | ebtor 1 | Tabatha | Michelle | Dolghinsen: | Page 49 c | | mber (if known) 25-1356 | <u>§1</u> |
|-----|--|--|--|--|---|-------------------|--|------------------------------|
| | | First Name | Middle Name | Last Name | ugc =3 . | | | _ |
| | | | | | | Column A Debtor 1 | Column B Debtor 2 or non-filing spouse | |
| | 8. U | Inemployment compens | ation | | | \$0.00 | \$0.00 | |
| | | o not enter the amount if nder | you contend that the | amount received was | a benefit | | | |
| | th | ne Social Security Act. Ins | stead, list it here: | | ↓ | | | |
| | F | or you | | <u> </u> | \$0.00 | | | |
| | F | or your spouse | | <u> </u> | \$0.00 | | | |
| | be de U di re th | Pension or retirement inc enefit under the Social So to not include any comper Juited States Government isability, or death of a me etired pay paid under cha that it does not exceed the intitled if retired under any | ecurity Act. Also, excension, pension, pay, to connection with a mber of the uniformer pter 61 of title 10, the amount of retired pa | ept as stated in the ne annuity, or allowance disability, combat-rela d services. If you rece in include that pay only y to which you would | ext sentence, e paid by the ated injury or ived any y to the extent otherwise be | \$0.00 | <u>\$0.00</u> | |
| | 10. Income from all other sources not listed above Do not include any benefits received under the received as a victim of a war crime, a crime ag domestic terrorism; or compensation, pension, the United States Government in connection winjury or disability, or death of a member of the list other sources on a separate page and put to | | | Social Security Act; painst humanity, or integral, annuity, or allow rith a disability, comba uniformed services. | payments ernational or ance paid by t-related | | | |
| | Total a | amounts from separate p | ages, if any. | | | + | + | |
| | | Calculate your total curre each column. Then add th | • | • | | \$6,718.00 | + \$0.00 | Total current monthly income |
| Pa | art 2: | Determine Whether | the Means Test A | applies to You | | | | • |
| 12. | Calcula | ate your current monthly | income for the year | Follow these steps: | | | | |
| | 12a. (| Copy your total current m | onthly income from lir | ne 11 | | | Copy line 11 here → | \$6,718.00 |
| | ı | Multiply by 12 (the number | er of months in a year | ·). | | | ı | x 12 |
| | 12b. T | The result is your annual | income for this part o | f the form. | | | 12b. | \$80,616.00 |
| 13. | Calcula | ate the median family in | come that applies to | you. Follow these ste | ps: | | L | |
| | Fill in t | he state in which you live | | New Jersey | | | | |
| | Fill in tl | he number of people in y | our household. | 4 | | | | |
| | | he median family income | | | | | 13. | \$163,110.00 |
| | | a list of applicable media | | | | separate | ι | |

- 14a. Line 12b is less than or equal to line 13. On the top of page 1, check box 1, *There is no presumption of abuse.*Go to Part 3. Do NOT fill out or file Official Form 122A-2.
- 14b. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. Go to Part 3 and fill out Form 122A-2.

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Middle Name

Part 3: Sign Below

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

X /s/ Tabatha Michelle Johnson

Signature of Debtor 1

Date 05/01/2025

MM/ DD/ YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court District of New Jersey

| In re | • | Johnson, Tabatha | a Michelle | | | | | |
|-------|--|---|---|---------------------------|-----------------|----------------------|---------------------------|--|
| | | | | | Case No. | 25-13561 | - | |
| Debte | or | | | | Chapter | 7 | | |
| | | | DISCLOSURE OF COMP | PENSATION OF A | TTORNEY | FOR DEBTOR | | |
| 1. | cor | mpensation paid t | C. § 329(a) and Fed. Bankr. P. 20 o me within one year before the fil behalf of the debtor(s) in contem | ling of the petition in b | ankruptcy, or a | agreed to be paid to | me, for services rendered | |
| | For | r legal services, I | have agreed to accept | | | | \$2,698.00 | |
| | Pric | or to the filing of t | his statement I have received | | | | \$2,698.00 | |
| | Bal | lance Due | | | | | \$0.00 | |
| 2. | The | e source of the co | empensation paid to me was: | | | | | |
| | A | Debtor | Other (specify) | | | | | |
| 3. | The | e source of comp | ensation to be paid to me is: | | | | | |
| | A | Debtor | Other (specify) | | | | | |
| 4. | ☑ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. | | | | | | | |
| | | ☐ I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached. | | | | | | |
| 5. | In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: | | | | | | | |
| | a. | Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; | | | | | | |
| | b. | Preparation and | d filing of any petition, schedules, | statements of affairs a | and plan which | may be required; | | |
| | c. | Representation | of the debtor at the meeting of cr | editors and confirmati | on hearing, an | d any adjourned hea | arings thereof; | |
| 6. | Ву | agreement with the | he debtor(s), the above-disclosed | fee does not include t | he following se | ervices: | | |

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B2030 (Form 2030) (12/15)

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

05/01/2025

/s/ Jeffrey E. Jenkins

Date

Jeffrey E. Jenkins Signature of Attorney

Jenkins Law Group 412 S. Whitehorse Pike Audubon, NJ 08106 Phone: (856) 546-9696

Jenkins Law Group

Name of law firm

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IN THE UNITED STATES BANKRUPTCY COURT DISTRICT OF NEW JERSEY CAMDEN DIVISION

IN RE: Johnson, Tabatha Michelle CASE NO 25-13561

CHAPTER 7

VERIFICATION OF CREDITOR MATRIX

| The above named Debtor hereb | v verifies that the attached | d list of creditors is true a | and correct to the best | of his/her knowledge. |
|------------------------------|------------------------------|-------------------------------|-------------------------|-----------------------|
| | | | | |

Date 05/01/2025 Signature /s/ Tabatha Michelle Johnson
Tabatha Michelle Johnson, Debtor